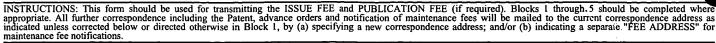
PART B - FEE(S) TRANSMITTAL

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23117 7	590 07/15/2004	/O' ' "	<u>ا</u> ا	ave its own certifica	ate of mailing or transmission.	nt of formal drawing, must
NIXON & VAN 1100 N GLEBE R 8TH FLOOR ARLINGTON, VA	OAD	SEP 2 8 2004	Certificate of Mailing or Transmission I hereby certify that this Fee(s) Transmittal is being deposited with the United States Postal Service with sufficient postage for first class mail in an envelope addressed to the Mail Stop ISSUE FEE address above, or being facsimile transmitted to the USPTO (703) 746-4000, on the date indicated below.			
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13/2004 AKELECH2 0000	0084 99816317	GTRADER	T T		1330.00 DP	(Signature)
1330.00 BR		01 FC:15(1 02 FC:15(4			300,00 UP (Date)	
<u>C-1504</u>	300.00 00		03 FC#800 1		12.00 BP	
B(APPLICATION NO.	FILING <u>D</u> EAT(H) OF	FIF	RST NAMED INVENT	OR	ATTORNEY DOCKET NO.	CONFIRMATION NO.
09/816,317	03/26/2001	03/26/2001			2801-36	8591
APPLN. TYPE	SMALL ENTITY	ISSUE FEE	PUE	BLICATION FEE	TOTAL FEE(S) DUE	DATE DUE
nonprovisional NO		\$1330		\$300	\$1630	10/15/2004
EXAMINER		ART UNIT	CLA	SS-SUBCLASS		
BARTS, SAMUEL A		1621 514		514-657000	_	
CFR 1.363). Change of correspond Address form PTO/SB/1 "Fee Address" indicat:	the address or indication of "Fe dence address (or Change of C 22) attached. ion (or "Fee Address" Indicat or more recent) attached. Use	orrespondence	2. For printing on the patent front page, list (1) the names of up to 3 registered patent attorneys or agents OR, alternatively, (2) the name of a single firm (having as a member a registered attorney or agent) and the names of up to 2 registered patent attorneys or agents. If no name is listed, no name will be printed.			
3. ASSIGNEE NAME AND	D RESIDENCE DATA TO B	E PRINTED ON TH	E PATENT (print or	type)		
PLEASE NOTE: Unless recordation as set forth in	s an assignee is identified be n 37 CFR 3.11. Completion of	low, no assignee dat of this form is NOT a	ta will appear on the substitute for filing	patent. If an assig an assignment.	gnee is identified below, the do	ocument has been filed for
(A) NAME OF ASSIGN	IEE	(B) F	RESIDENCE: (CITY	and STATE OR CO	OUNTRY)	
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Please check the appropriate	e assignee category or categor	ries (will not be printe	ed on the patent);	🗆 individual 🛛 🔻	corporation or other private gro	oup entity 🚨 government
4a. The following fee(s) are	enclosed:	4b. P	ayment of Fee(s):			
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Advance Order - # of	Copies 4	<u> </u>	The Director is her eposit Account Num	eby authorized by ber 14+1140	charge the required fee(s), or o	credit any overpayment, to opy of this form).
5. Change in Entity Status	(from status indicated above		- 		·	
a. Applicant claims SM	MALL ENTITY status. See 3	7 CFR 1.27.	b. Applicant is not o	laiming SMALL EN	NTITY status. See, e.g., 37 CFR	R 1.27(g)(2).
					sly paid issue fee to the applica gistered attorney or agent; or th	
(Authorized Signature)	yours adj	(Date)				· · · · · · · · · · · · · · · · · · ·
Arthur R Craw	ford 25 3271	Sent 28	3 2004			

This collection of information is required by 37 CFR 1.311. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 12 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, Virginia 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, Virginia 22313-1450.

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